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CONFIRMATION NO. 8492

SERIAL NUMBER 10/760,036	FILING DATE 01/16/2004 RULE	CLASS 433	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. LDC-922-1B CIP
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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 09/960,151 09/21/2001 ABN
 which claims benefit of 60/215,160 09/21/2000

** FOREIGN APPLICATIONS *****

None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/21/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY DE	SHEETS DRAWING 1	TOTAL CLAIMS 3	INDEPENDENT CLAIMS 1
Verified and Acknowledged Examiner's Signature		Initials			

ADDRESS

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TITLE

Mixing tip for dental materials

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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